

LAM Services Limited

# LAM Care 24 - Derby

## Inspection report

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26 April 2023

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

LAM Care 24 - Derby is a domiciliary care agency and supported living service. The service provides personal care to older and younger adults who may be living with a range of needs including dementia, mental health, learning disabilities, autism, and physical and sensory needs. At the time of our inspection there were 18 people using the domiciliary care service. There were 5 people who used the supported living service in 2 separate houses.

Not everyone who used the service received personal care. In this service, the Care Quality Commission can only inspect the service received by people who get support with personal care. This includes help with tasks related to personal hygiene and eating. Where people receive such support, we also consider any wider social care provided.

### People's experience of using this service and what we found

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Based on our review of safe and well-led the service was able to demonstrate how they were meeting underpinning principles of "Right Support, Right Care, Right Culture.

### Right support:

Care staff had the skills and knowledge to safely meet people's needs. Processes were followed to help the provider recruit staff who were suitable to work in care. People and their relatives were involved and engaged in their care.

### Right care:

People received care that promoted their safety and risks were reduced. Medicines were administered in line with good practice. Infection prevention and control measures were followed to help reduce the risks from infection.

### Right culture:

Care staff provided person-centred care and people experienced good outcomes from their care. The service aimed to continually improve and learn lessons. People and staffs' views were valued and used to develop the service. Audits and checks on the quality and safety of services were completed regularly.

For more information, please read the detailed findings section of this report. If you are reading this as a separate summary, the full report can be found on the Care Quality Commission (CQC) website at

[www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection and update

The last rating for this service was requires improvement (published 1 May 2021).

At our last inspection we found a breach of the regulation in relation to the systems used to assess and monitor the quality and safety of services. The provider completed an action plan after the last inspection to tell us what they would do and by when to improve.

At this inspection we found improvements had been made and the provider was now meeting this regulation.

#### Why we inspected

We carried out an announced comprehensive inspection of this service on 19,20,21 October and 16 November 2020. A breach of legal requirements was found in relation to the systems used to assess and monitor the quality and safety of services.

We undertook this focused inspection to check if the provider had made improvements and if they were now meeting the legal requirements. This report only covers our findings in relation to the key questions safe and well-led.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for LAM Care 24 - Derby on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service safe?**

**Good** ●

The service was safe.

Details are in our safe findings below.

### **Is the service well-led?**

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# LAM Care 24 - Derby

## Detailed findings

### Background to this inspection

#### Inspection team

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

#### Inspection team

The inspection was carried out by one inspector.

#### Service and service type

This service is a domiciliary care agency and supported living service. It provides personal care to people living in their own houses and flats.

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

At the time of our inspection there was a registered manager in post. They were also the registered provider.

#### Notice of inspection

We gave the service a short amount of notice for the inspection. This was because it is a small service and we needed to be sure that the provider would be in the office to support the inspection.

Inspection activity started on 24 April 2023 and ended on 28 April 2023. We visited the location's office on 24 April 2023.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us annually

with key information about their service, what they do well, and improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

We spoke with 1 person and 4 relatives of people that used the service. We spoke with 1 social care professional who was involved in the care of 2 people who used the service. We spoke with 5 staff including the registered manager, the care support manager and 3 care and support workers.

We reviewed the relevant parts of 3 people's care plans and 2 people's medicines records. We looked at audits, policies, training records and 3 staff recruitment files.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question requires improvement. At this inspection we have rated this key question good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk from abuse

- People and their relatives all said they felt safe with the care provided. They told us care staff were reliable and competent. This helped protect people from the risk of abuse.
- The provider had a safeguarding policy in place and care staff had been trained in safeguarding. Care staff we spoke with understood how people could be at risk of abuse and what actions they were to take to report their concerns. This meant the provider's systems and processes to help keep people safe were understood and followed by staff.

Assessing risk, safety monitoring and management

- People and relatives told us care needs and health conditions were managed well. One person told us, "Staff give me help with my [health condition]. The staff have had training on it. I have a team of staff who are now trained up for my needs." A relative told us, "I'm 100% confident [name of person] is being well looked after." Care staff told us they felt confident to meet people's care needs and had full access to people's care plans and risk assessments. This helped to ensure people received safe care.
- Risks were assessed, and people's safety was monitored. Care plans and risk assessments were in place for people's health conditions and care needs. Care staff we spoke with understood these and told us what actions they took to help ensure people's safety. This helped to ensure risks were reduced.
- Risk assessment and safety monitoring was in place for day-to-day risks. For example, staff received training and information on fire safety measures. This helped to ensure care staff knew what actions to take to keep people safe.

Staffing and recruitment

- There were enough staff employed to provide people with safe care. One relative told us, "We have 2 staff, 4 times a day and they arrive on time." Another relative told us, "I always ask for a 7am call and the staff are always there at that time. The odd day they can be a bit later, but there can be traffic. There are always 2 staff in the morning, [Name of person] cannot move without 2 of them." Care staff told us they did not feel rushed and had enough time to provide people with the care they needed. There were enough care staff to meet people's needs.
- People received care from consistent staff. A relative told us, "The staffing is consistent, and staff have built up a relationship with [name of person]." They told us this had contributed to their improved well-being. Another relative told us, "The staff are all lovely and they are always on time." One person told us, "The staff are matched to fit me and [my preferences] and the staff I have are competent to look after me." People received care from regular and consistent staff and this helped people to receive safe care.
- The provider had a recruitment policy in place. They followed this when recruiting care staff to ensure all the relevant pre-employment checks had been completed. This included checking references and obtaining

Disclosure and Barring Service (DBS) checks. These provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

#### Using medicines safely

- People who received support with their medicines felt this was well managed. One relative told us, "They give [name of person] all their tablets. I have no concerns over how they manage their medicines." Medicines administration record (MAR) charts showed people had received their medicines as prescribed. Care plans included what medicines people were prescribed and the arrangements in place for ordering and collecting medicines. This helped people receive safe care.
- Staff were supported to administer medicines safely. The provider had policies and procedures in place for staff to follow on the safe management and administration of medicines. Care staff completed training and had their competence to administer medicines checked before they provided this care. This helped to reduce the risks associated with medicines.

#### Preventing and controlling infection

- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.

#### Learning lessons when things go wrong

- The provider reflected and identified how to make improvements when things had gone wrong. For example, they met with people and their relatives to resolve any issues brought to their attention. This helped them improve people's care.
- Processes were in place to report and learn from any accidents and incidents. The provider had a policy in place, which care staff understood and followed. Records showed actions had been taken when any incidents and accidents had been reported. Actions to improve safety had been taken.

# Is the service well-led?

## Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question requires improvement. At this inspection we have rated this key question good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At our last inspection we found the provider had failed to effectively assess, monitor and mitigate risks. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found improvements had been made and the provider was now meeting this regulation.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Improvements had been made to the assessment and monitoring systems for the quality and safety of services. Audits had been regularly completed on a range of areas, including medicines, care staff attendance and whether calls were on time. Checks on care records were thorough and helped to ensure people's care plans were followed and records of care provided were accurate and comprehensive. These audits and checks had identified where any improvements were needed and what subsequent actions were taken. We found the actions taken had been effective and had led to improvements.
- Checks were completed to ensure care staff were compliant with the provider's policies. The provider checked care staff used personal protective equipment (PPE) and administered medicines correctly, and checked they provided people's care in line with their care plan. This helped to ensure the quality and safety of care provided.
- There was a registered manager in post. They were clear about their role and had a management team to support them. This helped to ensure audits and checks on the quality and safety of services were regularly completed.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Working in partnership with others

- The provider promoted a person-centred and positive culture. Staff spoke highly of the provider's leadership style. One staff member told us, "[The provider] is a leader and goes the extra mile, we want to be like that then. We want to do that something extra for people." People and their relatives also spoke highly of the service, their comments included, "I'm 100% happy, they are absolutely brilliant," and, "I can talk to [the provider] well, they are brilliant and amazing." People were positive about the service they received.
- The service was inclusive and achieved good outcomes for people. One relative told us their family member's health and well-being had improved with the care they received. They told us, "We work together and it's all absolutely fine, there is a level of flexibility there. I know [the management team] and I'm very relaxed and confident with the care they provide." People were included and helped to achieve positive outcomes from their care.

- The provider worked in partnership with others to achieve good care outcomes for people. For example, staff training was arranged with a range of professionals to ensure care staff receive the skills and knowledge they needed. One care staff told us, "[The provider] makes sure staff have had the training needed. They work with the hospital [teams] so our pressure sore training at the hospital was very good and so we can see what happens when pressure sores develop and how serious they are." A social care professional we spoke with told us the provider was, "Pro-active and keen to get things right. They are very accepting of feedback to help get any issues resolved." The provider worked effectively in partnership with others.

Continuous learning and improving care; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider looked to continuously improve from feedback. Records showed a range of feedback had been reviewed and opportunities taken to further improve the service. For example, to improve communication with staff the provider had introduced a regular newsletter. This showed the provider looked to continuously learn and improve.
- The provider had a duty of candour policy in place to follow when needed. Records showed the provider investigated any issue brought to their attention in an open and honest manner. Findings were shared with relevant people and issues resolved to people's satisfaction.
- The provider was aware of the requirements to send statutory notifications to CQC and these had been submitted as required. Notifications are changes, events or incidents that providers must tell us about. They are important as they help to show the provider is working in a transparent and open way.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People told us they felt involved. One relative told us, "We feel involved in the care plan, I know [a member of the management team] and tell them how things are." Another relative told us, "They ask for feedback and every so often we get [a member of the management team] come and talk to us. They pick up all the paperwork and sit and have a chat with us." People felt involved and had opportunities to give their feedback.
- The provider collected the views of people and staff from questionnaire type surveys. We saw a range of these had been completed with positive feedback. Where improvements had been suggested, actions had been taken to try and achieve these. People's views and feedback was listened to.
- Survey questionnaires were available in different formats. For example, in an easy-read format. This helped ensure people using the service with different communication needs were involved and had their equality characteristics respected.
- Staff were involved and valued. Staff told us they felt valued and enjoyed working at the service. The provider supported a range of team-building events and promoted activities to support various charities.